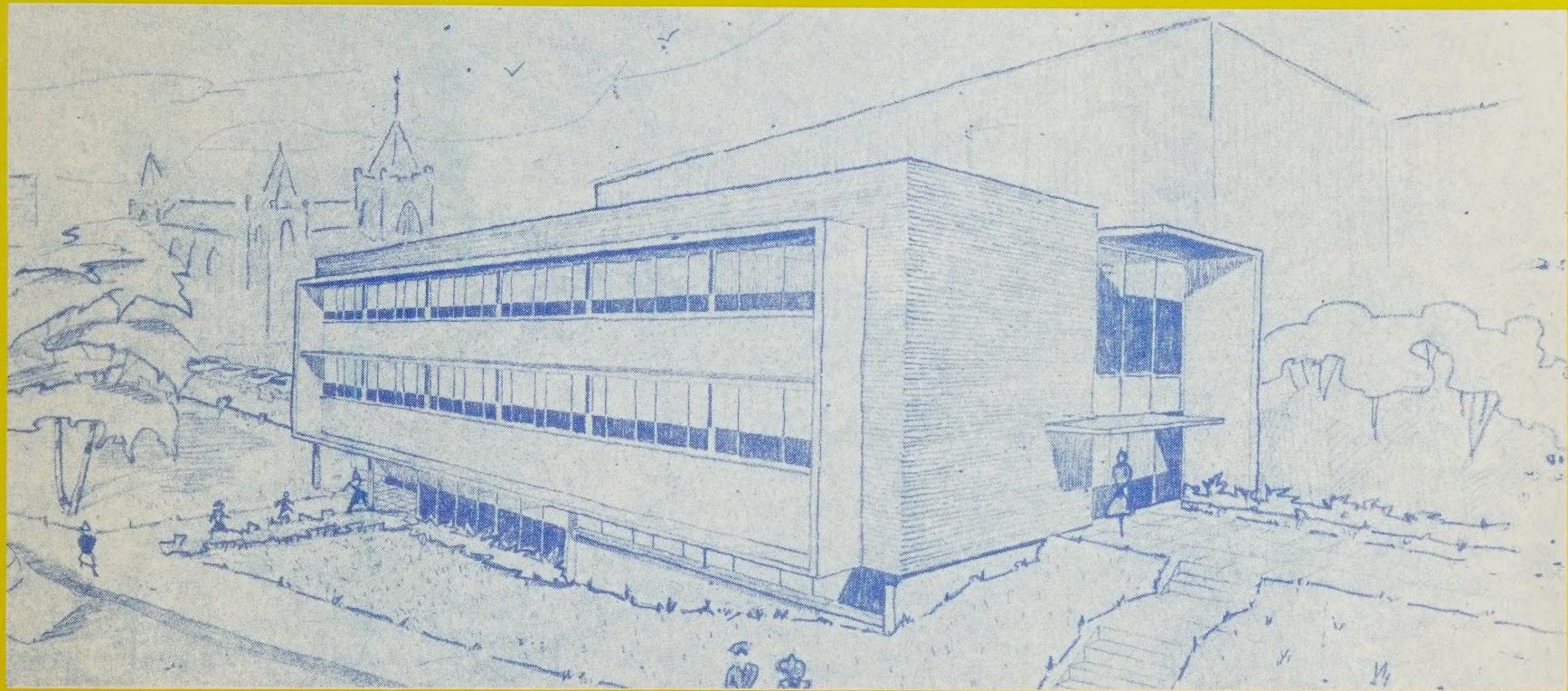


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North Regional Board of Health



Services for 1981
Conference Edition

Welcome Delegates!

The Hamilton-Wentworth Regional Board of Health is pleased to host the 1981 Annual Conference of the Association of Ontario Boards of Health and its member boards across Ontario.

We hope that your three days here in the "Golden Horseshoe" are a happy balance of stimulation, information and pleasure.

If there is any way we can be of service, please feel free to call on any one of us.

Thank you for coming.

Bienvenue délégués!

Nous sommes heureux de vous accueillir à Hamilton-Wentworth. On espère que vous passiez le temps très plaisant et intéressant ici pendant les trois journées de la conférence.

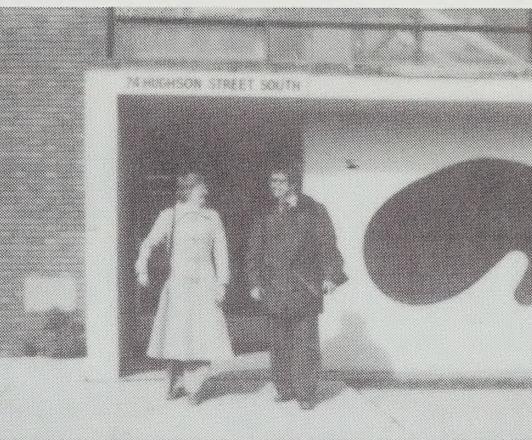
Si nous pouvons vous aider, n'hésitez pas à nous consulter, n'importe quel. Merci et amusez-vous bien!



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Dedication

These pages outline the function and structure of the Hamilton-Wentworth Regional Board of Health and its services.

The men and women who strive to make ours a healthy community deserve our respect and appreciation. This special 1981 conference report is respectfully dedicated to them.



THE HAMILTON-WENTWORTH REGIONAL BOARD OF HEALTH



Left to Right: Don Elder Secretary Treasurer, Councillor Paul Cowell, Councillor Jim McDonald, Mrs. Janet Farley, Councillor Pat Valeriano, Mrs. Joan McCluskey, Councillor Paul Drage, Dr. A.I. Cunningham, Medical Officer of Health.

Absent: Mayor Betty Ward, Councillors Dave Lawrence and Fred Lombardo.

Chairman's Report



**Councillor Pat Valeriano
Chairman**

The 180 staff members of the Hamilton-Wentworth Regional Board of Health serve Hamilton, Dundas, Stoney Creek, Glanbrook, Ancaster and Flamborough. This colourful, industrious community at the Head of the Lakes is home to its 410,000 residents whose traditions date back to the era of the United Empire Loyalists.

An outbreak of cholera in 1854 gave impetus to the creation of the Board of Health for

the town of Hamilton. In 1968, the County/City Health Unit was established and 9 years later it was expanded to provide services for the diverse metropolitan Region of Hamilton-Wentworth.

Seven of the nine Board members are chosen from the elected representatives of the Regional Council and serve a two year term; two additional Board members are appointed for a three year term by the Provincial government.

In addition to its three established committees: Finance, Property & Personnel, Programme and Service and Negotiations, the Board appoints ad hoc committees to deal with other important concerns as they arise.

Our 1980 Regional budget was approximately \$3,427,000 which averages out to slightly less than \$10.00 a year per person. Operating costs are shared by the Provincial government which contributes 75% while the remaining 25% is paid by the Region.

The 1980 budget of the Child & Adolescent Clinic (funded 100% by the Ministry of Community and Social Services) was approximately \$736,000. The Family Planning Clinic budget for 1980 was approximately \$119,000 and is totally funded by the Ministry of Health.

I'm sure as you read the following information on our numerous programs, you will understand the pride and pleasure which my co-workers and I share in the quality of community service offered by the Hamilton-Wentworth Regional Board of Health.

Our main office at 74 Hughson Street South houses the Inspection, Nursing, Child and Adolescent Divisions in addition to the Administrative and Executive Offices — Telephone 528-1441.

Should you wish any further information, we would be pleased to hear from you at our main building or any of its 5 satellite offices:

Mountain Office 775 Upper Wentworth St.
(at Mohawk Rd.) Telephone: 389-2203

Stoney Creek Office 13 Lake Avenue S., Stoney Creek
Telephone: 664-4232

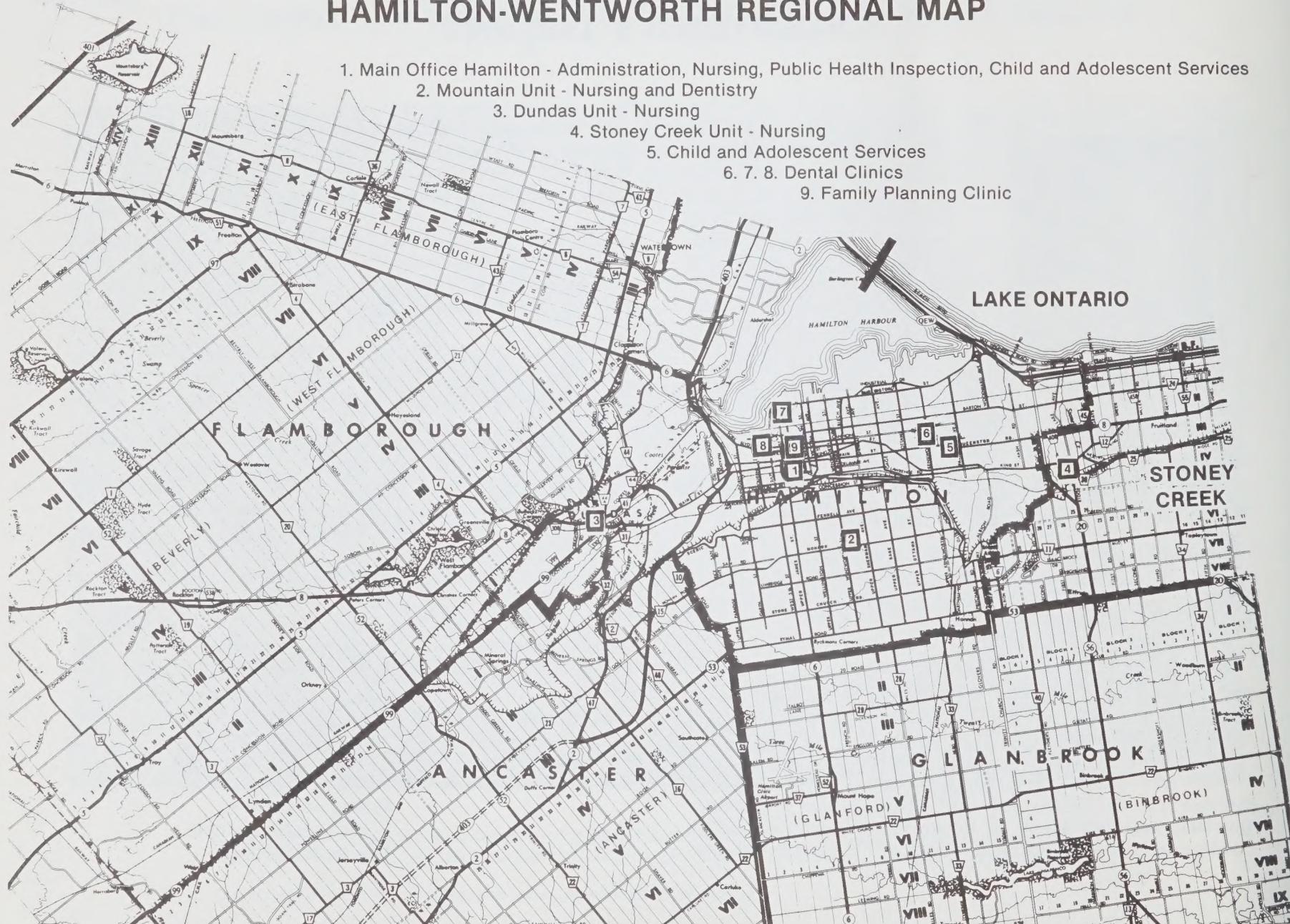
Child & Adolescent 78 Queenston Road
Clinic (East End) Telephone: 545-3093

Dundas Office 52 King St. E., Dundas
Telephone: 628-6325

Family Planning Clinic ... Planned Parenthood
Society of Hamilton
4 Catharine Street North
Telephone: 528-3009

HAMILTON-WENTWORTH REGIONAL MAP

1. Main Office Hamilton - Administration, Nursing, Public Health Inspection, Child and Adolescent Services
2. Mountain Unit - Nursing and Dentistry
3. Dundas Unit - Nursing
4. Stoney Creek Unit - Nursing
5. Child and Adolescent Services
6. 7. 8. Dental Clinics
9. Family Planning Clinic



Medical Officer of Health



Dr. A.I. Cunningham
Medical Officer of Health

Hamilton-Wentworth offers unique challenges and exciting possibilities:

The Medical school at McMaster University has substantial commitments to the Region, especially in the fields of psychiatry, pediatrics and epidemiology.

The Victorian Order of Nurses in this Region is one of the best in Canada.

The Ministry of Environment has skilled and experienced staff in the district office here.

Our Health Council, continues a long tradition of cooperation and collaboration between hospitals and related organizations. Strong voluntary associations such as Planned Parenthood, the Ontario Lung Association, and the Canadian Mental Health Association have worked with us on numerous projects.

The Academy of Medicine and Academy of Dentistry are both actively interested in public health programmes. These many friends and colleagues offer the Board of Health unique opportunities. Our policy, wherever possible, has been to promote and solicit cooperation and mutual support.

As examples of this policy: The Board of Health at the request of the Academy of Medicine ran the largest single day Measles Immunization. Twelve thousand children were immunized in literally one day "with a cast of thousands". Doctors, nurses and hundreds of citizen volunteers helped carry out the immunization in November 1967.

The Board of Health of the Hamilton-Wentworth Region provides the kinds of service provided by other Boards of Health. We serve an urban population of 310,000 and a suburban population of 100,000.

We do so by providing nursing services, inspection and dental services much in the same way as other Boards of Health in addition, the Board of Health since 1924 has provided psychiatric and counselling services. This has been funded totally by the Ministry of Community and Social Services since 1977.

The Academy of Dentistry with strong support in cash and our staff services promoted a successful Fluoridation campaign.

The Planned Parenthood Association in Hamilton contracted to provide clinic services for the Board of Health. This is a continuing development.

The V.O.N. in this Region provides acute and chronic home nursing and the Order purchases services for these programmes from the Board of Health on a fee-for-service basis.

Physicians at the University have helped to plan and perfect our influenza surveillance, vision and hearing testing and our scoliosis screening.

Such acts of cooperation arise from an atmosphere of congeniality and collegiality which we prize and take pains to perpetuate.

Our Nursing Service carries out the usual visiting of new mothers and mothers-at-risk. Immunization, vision and hearing testing are also nursing activities. We are now evaluating, with the help of the University, our five year experience of nursing inspection to find children with scoliosis. As well, nursing staff provide home care services, follow-up visits for the mentally ill and student counselling in regard to health problems.

Other nurses visit and take referrals from Pediatric wards, Obstetric wards and Medical wards of our local hospitals. These referrals and visiting older people in regard to medico-social needs are growing activities. Finally, our staff also follows up contacts of people with diagnosed venereal diseases.

Our Family Planning Program is carried out on its clinical side by Planned Parenthood Association of Hamilton. Since 1967 we have had a good working relationship with this Association.

At that time, the Board of Health paid a sustaining grant of \$4,000 to the Association which has been a pioneer in Family Planning since the 1930's.



Dr. L.M. Browne
Assoc. Medical Offic. of Health



Mrs. Myrtle Kirstine
Director

Introduction

Public health nursing concerns itself with all aspects of family health care. Collaborating with other community agencies, the public health nurse advises, counsels and provides health teaching to the community in meeting the needs of all age groups.

Services are provided by ten (10) nursing teams consisting of public health nurses, registered nurses, registered nursing assistants and clerks. The focus of the team approach is to maintain the commitment to health promotion and education. Programmes and services are designed to meet individual, family and group needs in a variety of settings: schools, clinics, homes, physician attachments and hospital liaison services.



Using her extended knowledge the public health nurse acts as a resource person to parents by assisting them in the understanding of a wide variety of health related subjects such as nutrition, child growth and development, behaviour management, conception control and interpersonal relationships.

The school programme includes pre-school interviewing and counselling and screening for vision and hearing problems, immunization and scoliosis. When referrals are initiated as a result of screening, careful follow-up is ensured by the public health nurse.



Acting as group leader, the public health nurse works with parents with the promotion of health and the physical and emotional well-being of the child. Childbirth education is one area of responsibility.

The public health hospital liaison service works collaboratively with the hospital and the community in the planning of the individual's needs. This may necessitate a referral to the hospital. The co-ordination of patient care is a major responsibility of the public health nurse attachment with several hospitals.

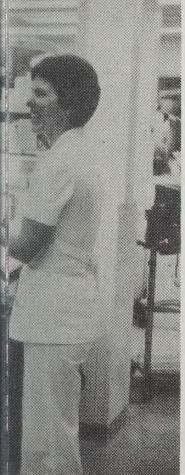


SERVICE



health nurse assists expectant mothers during pregnancy, preparation for childbirth and parenting to couples and single parents.

Nurse ensures continuity of care by hospital staff, in the assessment and following hospital discharge. This community resources. Similarly, promoted through public health practices in the region.



In order to work effectively in servicing the public, joint visits with public health inspectors, nutritionists or other colleagues is sometimes necessary.



School health services, provided by public health nurses include promotion of healthy lifestyles on an individual basis or in group or classroom settings, such as the development and implementation of the family planning programme. The public health nurse works closely with school personnel in the identification and management of health related concerns of children and their families.



With the support and guidance of public health nurses, seniors are encouraged to maximize their independence in activities of daily living. When necessary, seniors are assisted in selecting alternative living arrangements as their needs change. Public health nurses offer health supervision and guidance regarding healthy lifestyles, monitoring of activity levels, medication, nutrition and other areas of health care.

Child And Adolescent Services



Mr. Hank Van Dooren
Director

The Clinic serves children and adolescents, 2 to 18 years, who reside in the Hamilton-Wentworth Region. Referrals are made by Public Health Nurses, Physicians, other agencies, Board of Education, and by parents themselves. Parents are able to call the Clinic to enquire for help for their children. These enquiries are handled on the telephone by senior staff. These initial contacts are important, and often do much to help the parents clarify their concerns.

They do not necessarily lead to the child becoming a case at the Clinic as some of the requests are not suitable or could be better handled by another agency. Where referrals are not appropriate, the parents are helped to make contact with the appropriate agency.

In 1980, 603 new referrals and 115 re-referrals came to the Clinic. This compares with 1979 when 606 new referrals and 105 re-referrals were entered. The total caseload in 1980 was 1,924, and in 1979 this was 1,860.

The total number of full-time staff of the Child and Adolescent Clinic is 23, and this includes office staff. There are 11 part-time staff. The major mental health disciplines are represented by a chief psychologist, a registered psychologist, 4 psychometrists, 3 senior social workers, 4 child care workers, and 2 speech pathologists. The part-time staff includes 4 consulting psychiatrists, 2 consulting pediatricians, 1 psychometrist, and 4 part-time psychometrists for court assessments. The staff are assigned to one of four teams and each team is managed by a team co-ordinator who is a senior staff member selected from one of the disciplines. The team co-ordinators meet with the Clinical Director and Chief Psychologist and they form the Management Group of the Clinic.

The kinds of cases seen at the Clinic vary from children and adolescents who have learning disorders to those who act out severely as a result of family discord or psycho-social difficulties. Initially the child is seen as part of an assessment process which may include one or more family interviews or a psychological assessment. Depending on the nature of the problem presented, the child might be seen by one of the consulting psychiatrists or pediatricians, or the parents might be directed to obtain a more complete medical examination through the family physician.

The assessment process enables the team to formulate a comprehensive treatment plan for the child and the family. This plan is implemented by the "prime worker" who provides a special function in ensuring that the plan is carried out effectively. This person may provide the major treatment or could be a liaison with another member of the team who is providing therapy. The Clinic offers a wide range of treatment services: family therapy, play therapy, individual therapy, group therapy, developmental exercises and speech therapy. An important part of the overall treatment could be the involvement of a clinic volunteer. This person is trained by the clinic to offer a very unique relationship to the youngsters, and the impact which the volunteer has on the child becomes an important consideration in the treatment plan.

The Clinic offers an important service to the Unified Family Court by assessing and making recommendations on behalf of children who are referred under the Juvenile Delinquents' Act or the Child Welfare Act. In these cases the Clinic endeavours to develop and maintain good communication with other helping agencies in order to contribute to a comprehensive approach which avoids duplication and makes for the best use of community resources.

The relationship which the Clinic has with the Board of Health and the Medical Officer of Health is innovative and unique, and discussions among the various division heads, as well as close cooperation among staff from the various divisions at the front line, will do much to maintain a high level of health care in the Region of Hamilton-Wentworth.

Inspection Division



A.A. Tomlinson
Director

The Public Health Inspection division has far-reaching and varied responsibilities.

As well as a Director and Chief Inspector, there are eighteen public health inspectors in our Region. Each one is assigned to a particular district.

The primary function of our inspectors is to enforce the Public Health Act of Ontario and its regulations. Among these are food premises, communicable diseases, swimming pool inspection, meat processing and

slaughter house regulations. All inspectors make regular visits as scheduled in our CAPHIS (Computer Program) to fifty-five different types of establishments including restaurants, food stores, lodging houses, hairdressers and day nurseries.

Six of the inspectors also work in the suburban areas enforcing the Environmental Protection act. Part VII of the act sets out the conditions for septic tank system approval in subdivisions, private homes, trailer parks and business establishments. 40% of the work load is taken up in investigating complaints i.e. inspection and related legal actions. Some of the numerous complaints investigated are excessive noise, vermin, sewage problems, family pets, defective plumbing, lack of heat and poor sanitation such as uncovered garbage.

Our division is heavily involved in communicable disease control. Special attention is given to food handlers and hospital workers who must be restricted from their place of employment when infected.

Pets and other animals involved in rabies investigations are also our responsibility, particularly when there is human involvement with a rabid animal. We ensure that the animals concerned are quarantined for the appropriate length of time.

Due to the reporting of some human cases of encephalitis in south-western Ontario in 1976, the Ministry of Health requested that health units in this area begin a mosquito larvicide program. We have about 500 acres of water in the region that are monitored for mosquito larvae and sprayed. This is a very effective service and controls to a great extent, the mosquito breeding location. Fogging is also done on rare occasions and under very controlled circumstances.

Our division also aids the municipalities, the Liquor License Board of Ontario and various provincial agencies in licensing establishments in the Region.

Inspections are also made to assist as required, the Land Division and local regional Planning Departments and also the Niagara Escarpment Commission.



Mr. F. Schimoda
Chief Public Health Insp.



Nutrition Services



Miss Helen Hale
Public Health Nutritionist

intellectual capacity and work performance. The Public Health Nutritionist in conjunction with and through other members of the public health team is involved in intervention to prevent lifestyle diseases and to educate and motivate individuals to be responsible for their nutrition behaviour.

Although a public health nutritionist provides some direct nutrition service to the community through responding to nutrition information requests via telephone, letter, individual counselling and group presentations, the major impact of Nutrition Services is through incorporating nutrition into existing public health programs. For this reason I have spent considerable time orienting myself to the activities of each division and describing my role in the Health Unit. I have attended team meetings in each division, taken part in a series of childbirth education classes, spent time in schools with the Public Health Nurse (PHN), visited a Seniors' Building, made home visits with the PHN, attended Dental Health Education classes given by the preventive dental staff and made visits with the Public Health Inspector. All of these activities have given me insight into the nutrition education needs of the Health Unit staff as well as the nutrition education needs of the community at large.

As the only nutritionist in the Health Unit, I am very much interested in establishing liaison with agencies/organizations and groups in the community that provide nutrition or related services. Such a linkage assists in the identification of community nutrition needs. To this end, my chairmanship of the Hamilton and District Nutrition Committee has proved most beneficial.

There are agencies/organizations/groups and individuals in the community that can become providers of nutrition education with nutrition consultation from the Public Health Nutritionist. For example, suggestions are made to the libraries regarding the purchase of good nutrition books and films. In addition, Nutrition Newslet-

Nutrition Services were formally initiated in the Hamilton-Wentworth Regional Health Unit with my appointment on January 12th, 1981. As a public health nutritionist, I am primarily concerned with assessing the nutrition needs of the total community and co-ordinating, planning, implementing and evaluating nutrition education programs which are directed towards health promotion and disease prevention of mass populations. Nutrition plays a role in the prevention of many of today's major public health problems, e.g. obesity, cardiovascular disease, hypertension, maturity onset diabetes, dental caries and nutritional anemia. Nutrition also plays a role in reproduction, resistance to infection, growth and development,

ters developed by myself and other nutritionists are distributed to private practitioners, social service agencies, day care centres, community leaders, local media, etc. who reach clients that the public health staff may less frequently or rarely reach. Ultimately the total community is the target of this nutrition information.

An annual challenge is the organization of Nutrition Week which requires the cooperation of a wide variety of professionals interested in promoting good nutrition. March 2 - 7, 1981 marked the first National Nutrition Week in Canada with the theme "Energy In - Energy Out". Under my chairmanship a Nutrition Week Planning Committee was struck and the following activities were provided:

(a) A one-week display at Lloyd D. Jackson Square Mall which included height/weight measurements, a computer assessment of participants' diets, individual nutrition consultations based on computer analysis, nutrition games and quizzes, pamphlets, posters and films. The display opened with an official proclamation of National Nutrition Week by Chairman Anne Jones. Both Mrs. Jones and Councillor Pat Valeriano, Chairman of the Board of Health, set the stage for a successful week by having the computer assess their breakfast meal. The display was manned by Dietitians from Chedoke-McMaster Hospitals, St. Joseph's Hospital, and St. Peter's Hospital, Community Nutritionists, Home Economists, Nutrition Students from the University of Guelph, as well as Public Health Nurses and the Public Health Nutritionist. All participants who had their diets analyzed and received consultation expressed sincere gratitude for the service provided.

(b) Two television interviews and an open-line radio show by the Public Health Nutritionist and a Home Economist.

(c) An evening seminar at the Y.M.C.A. open to the public by the Public Health Nutritionist in conjunction with Dr. Niel Toews, Cooper Professor of Nutrition, Faculty of Health Sciences, McMaster University.

(d) Displays of recommended nutrition books in libraries.

(e) Promotion of Nutrition Week theme in the school by Public Health Nurses and promotion to community agencies and organizations via letter from the Public Health Nutritionist.

The Public Health Nutritionist in her role as a resource person maintains current nutrition literature files and a resource library for the benefit of public health staff, community professionals and groups, as well as individual consumers. With the assistance of a clerical person a Nutrition Resource Centre containing numerous nutrition pamphlets and teaching aids has been established in the main office of Hamilton-Wentworth Regional Health Unit.

There are certainly many challenges ahead for Nutrition Services in this Region. I am looking forward to conducting nutrition in-service education programs for public health staff and other professional groups, developing nutrition education resources and programs, participating in applied nutrition research with colleagues at McMaster University and working in conjunction with three Boards of Education and the Ontario Milk Marketing Board to provide nutrition education in the schools. In closing I'd like to say that it is a pleasure to work with a multidisciplinary group whose main goal is the promotion of optimum health and the prevention of disease.

Family Planning Clinic



Mrs. Mabel Burns
Director

The Family Planning Clinic located at 4 Catharine St. N. (across from Terminal Towers and/or one block from the bus terminal) is central and easily accessible to the community at large.

The Clinic is staffed by registered nurses, 2 full-time, 2 part-time, 3 family practice doctors and 2 office personnel. There is a supportive and accessible network of obstetricians, gynecologists and family practice doctors to whom we may refer our patients/clients for further assistance, whenever necessary.

The Centre program consists of one of prevention and one of treatment and is available to all who request assistance.

The preventive program, which gives accurate and factual information on contraception, is available at all times on an individual basis, but is also designed for three specific sessions each week (Thursday and Fridays). At these sessions, information on anatomy (male and female), physiology, contraceptives, pregnancy, venereal disease is given by a staff nurse. The nurse teaches self-breast examination, gives an overview on good nutrition and health habits as they specifically pertain to the sexually active person. These sessions are mandatory to all persons wishing birth control through this Centre. The partner of each person using these services is urged to attend for his own education and understanding. Some persons who are established on a contraceptive method by a family doctor, also attend and some request information on the contraceptive prescribed, by phone contact with the staff. Most clients using the clinic services become aware of the Centre from persons favorably impressed with the services or as a result of assistance given with school projects and public appearances at schools, churches and community agencies.

The Centre information sessions are attended by approximately 70 -100 prospective clinic users each month, with attendance by friends of the clients accounting for another 20 to 30 people. Contacts made through

speaking and project assistance average approximately 50 to 100 persons monthly, throughout the year. Many of these persons gather information to relate to classmates and friends.

The treatment component of the program consists of routine gynecological examination and tests by the staff doctors, prescription for contraceptives, or treatment of problems arising from sexual activity or the use of a contraceptive method.

The Centre conducts three weekly clinics of approximately 3 hours duration, with staff doctors, nurses and volunteer nursing personnel in attendance. The monthly total average clinic attendance is approximately 250 to 300 persons, of which 60 to 70 are attending for the first time, the remainder returning for routine check-up or treatment of problems. Routine V.D. testing on all persons using this service, with treatment and follow-up for the patient and a referral to the V.D. clinic for the partner is arranged when no family doctor involvement is requested. Pregnancy testing or various laboratory tests are done in a community lab, as required by the staff doctors.

Our clinic surveys and studies have confirmed the well-documented theories that 95% of persons seeking assistance for birth control from a family doctor or clinics such as this, are sexually active before choosing a method. One third of persons using this service come because of fear of pregnancy (50% of this third are not, in fact, pregnant). 73% of the clientele served began their sexual activity from age 13 to 18 years (slightly more from 16 - 18 years). 16% of pregnancies occur after first sexual encounter. The social and economic situation of each person had no bearing on their use of the services and their religious affiliations seemed to have little bearing on their decisions. The survey indicated there is a wide difference in school sex education programs, many persons indicating they received some helpful information as far as the program went, but the program is not mandatory for all students, so many received only anatomy and physiology at the senior public school level.

On an average, a person using these clinic services, receives approximately two hours of medical staff time for a first visit. Many persons return on several occasions for discussion, support and encouragement, hopefully developing a healthy responsible attitude toward their life style (some persons need constant reassurance and support).

The persons using these services are well cared for medically. They are supported and encouraged by understanding and empathetic staff and, for the most part, are extremely grateful for such a community service.

Division of Community Dentistry



Dr. S.K. Tanden
Director

The Division of Community Dentistry of the Hamilton-Wentworth Health Unit has a staff of 18 people. This division is composed of two sections: The Treatment Section and The Preventive Section.

The Treatment Section has 5 dental clinics, two of which are located in the east end of the City, one on the Mountain and one each in Centennial and Hess St. Schools. Except for the Centennial School dental clinic which operates on a part-time basis, all the other clinics function on a

full-time basis staffed by a dentist and a dental assistant.

Basic dental treatment is offered, free of charge, to the children attending Hamilton City Schools. Entry into the system is determined using a "means test". Its guidelines are established by the Board of Health on the recommendation of the Dental Director. The City dental clinics do not accept children whose parents have prepaid dental plans or any other kind of dental insurance. However, this stipulation is waived in cases of emergency. Dental treatment on a very limited basis, is provided to the residents of St. Peter's Centre (Chronic Geriatric Facility) as part of a pilot project.

Hamilton children attending school from junior kindergarten to grade 13 are recommended for dental treatment by Public Health Nurses and members of the Dental Preventive Program. Frequently requests are received from school principals and teachers. Among other sources of referral are agencies such as the Social Services, and on other occasions requests for dental treatment are also received from churches, private dentists and from parents directly.

In 1979, a total of 10,150 visits were made and dental work for over 3,600 children was completed.

The Preventive Section staffed by 4 dental hygienists and 4 preventive dental assistants, offers dental health education to the school children of the entire Region of Hamilton-Wentworth (grades K - 8). The general nature of this program is as follows:

- (i) To demonstrate and teach proper tooth brushing technique through self brush-ins.
- (ii) To teach the proper use of dental floss to appropriately aged children.
- (iii) To teach lessons on the causes and prevention of tooth decay, plaque and gum disease, utilizing audio-visual methods.
- (iv) To offer Nutritional Counselling and proper oral hygiene instructions.
- (v) To carry out dental screening and referrals.
- (vi) To provide fluoride mouth-rinses to all the schools of the Region other than the City of Hamilton where this service is offered on a selective basis.

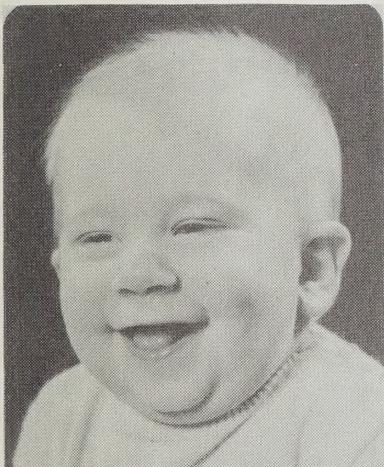
Although the main thrust of the preventive dental program is school-based, we also offer our services to the residents of Participation House, the Amity, the Chronic Care Division at Chedoke Hospital and some Day-Care Centres where we insist on the presence of one parent. We have introduced dental health education and promotion at St. Peter's Centre this year along with in-service training of their staff. Plans are being made to visit more institutions where the elderly of this community reside.

Besides carrying out the Provincial Dental Survey every 2 years, this section also carries out dental health status surveys at randomly selected schools to study the pattern of dental disease.

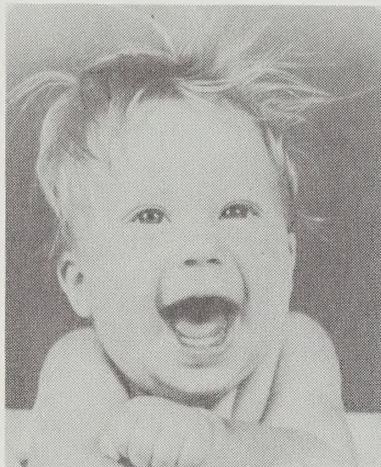
Finally, Topical Fluoride Clinics are offered to all the children at our mountain location during school breaks and summer holidays.

Both the Treatment and Preventive Sections work in close liaison with the different Boards of Education, Public Health Nurses, other agencies and some Regional Departments.

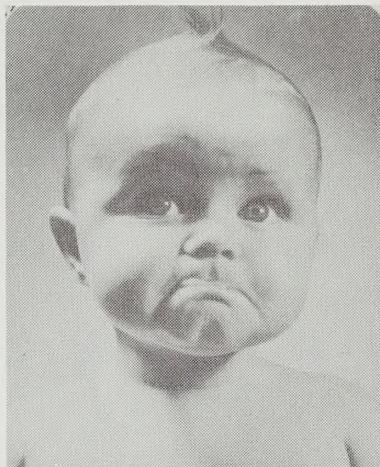
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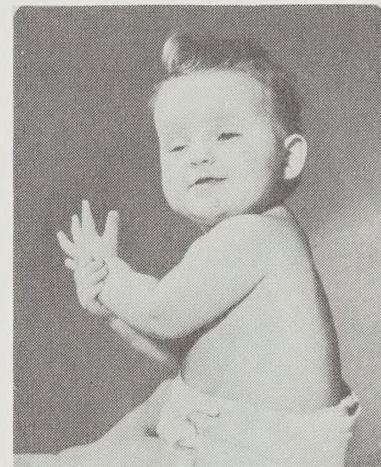
*Health Conferences
Make For Better Health*



*Which Floor Is The
Hospitality Suite On ?*



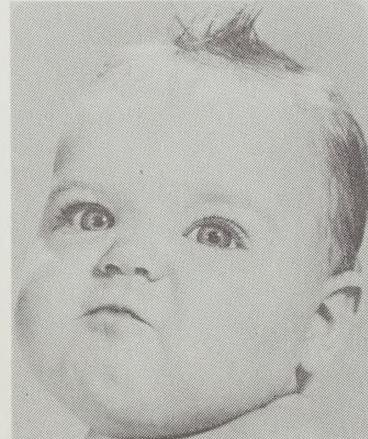
*Some Delegates Have
No Sense Of Decorum*



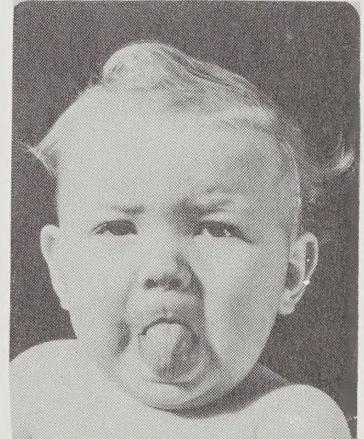
*I'm From the Government
And I'm Here To Help You*



*The Motion Is Properly
Moved And Seconded*



*Please Have The Secretary
Re-Read That Motion
In Its Entirety*



*Mr. Chairman.....I Have
Only One Comment*



The End Is Nearly In Sight

HAMILTON PUBLIC LIBRARY



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Better Health For A Better Life

The Hamilton-Wentworth Regional Board of Health has published this 1981 Conference Report for the dissemination of information only.

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